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JAN 23 2004

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7590

01/15/2004

KAREN J. MESSICK, ESQ.
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

JARED G. SILBERTHORN	(Depositor's name)
	(Signature)
1/20/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/962,027	10/31/1997	EUGENIO A. CEFALI	32892.23	8371

TITLE OF INVENTION: INTERMEDIATE RELEASE NICOTINIC ACID COMPOSITIONS FOR TREATING HYPERLIPIDEMIA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	04/15/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
JOYNES, ROBERT M	1615	424-465000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. KAREN J. MESSICK
 2. _____
 3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

KOS PHARMACEUTICALS, INC.

MIAMI, FL

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee
- ☐ Advance Order - # of Copies _____

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2543 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

1/20/04

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)



PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Eugenio A. Cefali
Serial No.: 08/962,027
Filing Date: 31 October 2003
Title: INTERMEDIATE RELEASE NICOTINIC ACID COMPOSITIONS
FOR TREATING HYPERLIPIDEMIA HAVING UNIQUE CMAX,
TMAX AND AUC BIOPHARMACEUTICAL CHARACTERISTICS
Examiner: Robert M. Joynes
Group Art Unit: 1615
Attorney Docket Number: 50454-56103USCIP1

VIA FACSIMILE AND MAIL

1.703.746.4000 (2 pages being transmitted.)

MAIL STOP ISSUE FEE

Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

ISSUE FEE TRANSMITTAL

Dear Sir:

In connection with the above-referenced United States Patent Application and with regards to the Notice of Allowance issued 15 January 2004, please charge the requisite Issue Fee of \$1330.00 to our Deposit Account No. 50-2543. A duplicate copy of this letter is enclosed herewith. No additional costs or fees are believed to be due in connection with this application, however, please charge any additional costs or credit any overpayment to this deposit account.

Respectfully submitted,

Kos Pharmaceuticals, Inc.

Karen J. Messick, Esq.
Attorney for Applicants
Registration No. 46,256

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Date: 1/20/04

CERTIFICATE OF MAILING (37 C.F.R. § 1.8(a))

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop Issue Fee, Commissioner for Patents, Alexandria, VA 22313-1450 on the date indicated below.

Date: 1/20/04

Jared G. Silberhorn